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# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

James F. McGuckin, Jr., et al

Serial No.

10/696,932

Examiner: Richard R. Shaffer

Filed:

October 30, 2003

Group Art Unit: 3733

For:

**VEIN FILTER** 

Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

### **CERTIFICATE OF MAILING**

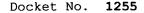
Date of Deposit: 6/13/68

I hereby certify that the following:

- [X] This Certificate of Mailing
- [X] Amendment
- [X] Amendment Fee Transmittal
- [X] Replacement Sheet Figs. 4 & 5
- [X] Return postcard

are being deposited with the United States Postal Service first class mail on the Date of Deposit indicated above in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Neil D. Gershon 1011 High Ridge Road Stamford, CT 06905 (203) 329-0289





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## AMENDMENT FEE TRANSMITTAL

COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for the above-identified application.

 $[\mathbf{X}]$  No additional fee is required.

[ ] The additional fee has been calculated as shown below:

#### CLAIMS AS AMENDED

|                                   | Claims<br>Remaining<br>After<br>Amendment     |   | Highe<br>Cover<br>Previ<br>Payme | Extra |   | Rate<br>Fee | Additional |    |      |
|-----------------------------------|---|---|----------------------------------|-------|---|-------------|------------|----|------|
| Total<br>Claims*                  | 17  | - | 20                               | =     | 0 | x           | \$ 50.00   | \$ | 0.00 |
| Independent<br>Claims             | 3   | - | -3                               | =     | 0 | x           | \$210.00   | \$ | 0.00 |
| Multiple<br>Dependent<br>Claim(s) | pendent Multiple Dependent Claim(s) and there |   |                                  |       |   |             |            |    | 0.00 |
|                                   |   |   |                                  |       |   |             |            |    | 0.00 |

<sup>\*</sup> Includes all independent and single dependent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. §1.75(c).

- [ ] Charge the fee of \$0.00 to Deposit Account No. 501567
  TWO DUPLICATE COPIES OF THIS SHEET ARE ATTACHED.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required for this amendment, or credit any overpayment to Deposit Account No. 501567. TWO DUPLICATE COPIES OF THIS SHEET ARE ATTACHED.
- [ ] Pursuant to 37 C.F.R. §1.48(b) an Amendment and Petition to Delete Inventor(s) is enclosed.

Petition for Extension of time pursuant to 37 C.F.R. \$1.136(a): [please check one]

- 1. [ ] Is enclosed herewith.
- 2. [X] Is not believed to be required. However, if a petition for extension of time under 37 C.F.R. §1.136(a) is required with this Amendment, please treat this paper as a petition for such extension. The Commissioner is hereby authorized charge the required extension fee pursuant to 37 C.F.R. §1.17, to Deposit Account No. 501567.

Respectfully submitted,

Dated: 6/13/08

By:

Neil D. Gershon Reg. No. 32,225

Attorney for Applicant

Neil D. Gershon 1011 High Ridge Road Stamford, CT. 06905 (203) 329-0289



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Dated: 6/13/0%

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Neil D. Gershon Reg. No. 32,225

Attorney for Applicant

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